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### **Prenatal Phthalate Exposure and Childhood Growth and Blood Pressure: Evidence from the Spanish INMA-Sabadell Birth Cohort Study**

Damaskini Valvi, Maribel Casas, Dora Romaguera, Nuria Monfort, Rosa Ventura, David Martinez, Jordi Sunyer, and Martine Vrijheid

**Figure S1.** Directed Acyclic Graph of the known or assumed relationships between covariates retained in the final models.

**Figure S2.** Associations between the average 1<sup>st</sup>-3<sup>rd</sup> pregnancy trimester concentrations of  $\Sigma$ HMWPm (A) and  $\Sigma$ LMWPm (B) metabolites (log<sub>2</sub>-transformed, in  $\mu$ g-g creatinine) and dichotomous outcomes. All models adjusted for child sex, exact age at examination and maternal characteristics (country of origin, age at delivery, parity, education, social class, prepregnancy BMI and smoking in pregnancy). Effect estimates for systolic and diastolic BP are shown per tertile of exposure (i.e. T2: tertile 2; T3: tertile 3). The RR in the reference groups is 1. (Phthalate exposure modeled continuously for all other outcomes).

**Table S1.** Average 1<sup>st</sup>-3<sup>rd</sup> pregnancy trimester concentrations of  $\Sigma$ DEHPm and MBzP metabolites (log<sub>2</sub>-transformed, in  $\mu$ g-g creatinine) and growth and BP outcomes.

**Table S2.** Average 1<sup>st</sup>-3<sup>rd</sup> pregnancy trimester concentrations of MEP, MiBP and MnBP metabolites (log<sub>2</sub>-transformed, in  $\mu$ g-g creatinine) and BP outcomes.